Only

## STATEMENT OF

PAGE 1/5

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. **Democratic Coalition** 1207 WILLOW AVE ADDRESS (number and street) #16 (Check if address is changed) Hoboken 07030 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nate@democraticcoalition.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.DemocraticCoalition.org (Check if address is changed) DATE 09 2016 C00612846 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lucia, Francesca, N,, Type or Print Name of Treasurer Lucia, Francesca, N,, [Electronically Filed] 12 08 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100